SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE	7	50 OF	2	279		
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	×	11a		11b		11c		12			
		13		14		15		16		17	

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) LaRouche Political Action Con	nmittee	
Full Name (Last, First, Middle Initial) JOHN E LORD Mailing Address P.O. BOX 339 City SEBASTOPOL FEC ID number of contributing federal political committee. Name of Employer NORCAL AMBULANCE Receipt For: 2014 Primary General Other (specify) Other (specify)	State Zip Code CA 95473 C Occupation MEDIC Aggregate Year-to-Date ▼ 3600.00	Date of Receipt 05 04 2015 Transaction ID: CASHIN00109012501001 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) DON L LOVELAND SR Mailing Address P.O. BOX 585 City MOXEE FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: 2014 Primary General Other (specify) Other (specify)	State Zip Code WA 98936 C Occupation RETIRED Aggregate Year-to-Date ▼ 500.00	Date of Receipt M. M. J. P. P. J. Y.
Full Name (Last, First, Middle Initial) STEVEN C LOVE Mailing Address P.O. BOX 260 City HEALY FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: 2014 Primary General Other (specify)	State Zip Code AK 99743-0260 C Occupation RETIRED RAILROAD ROADMASTER Aggregate Year-to-Date ▼ 700.00	Date of Receipt O1
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1600.00
TOTAL This Period (last page this line number	r only)	1 1 1 1 1 1 1 1